UNITED STATES

SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

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Date Received

FORM D

NOTICE OF SALE OF SECURITIES 1 8 200/ PURBUANT TO REGULATION D, SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering (N) check if this is an amendment and name has changed, and indicate change.) Wherify Wireless, Inc. Series B Convertible Adjustable Preferred Stock Filing under (Check box(es) that apply): [] Rule 504 [] Rule 505 [X] Rule 506 [] Section 4(6) [] ULOE Type of Filing: [] New Filing [M] Amendment A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer Name of Issuer ([] check if this is an amendment and name has changed, and indicate change.) Wherify Wireless, Inc. (the "Issuer") Address of Executive Offices (Number and Street, City, State, Zip Code Telephone Number (Including Area Code) 901 Mariners Island Boulevard, Suite 300, San Mateo, California, 94404 (650) 551-5200 Address of Principal Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area (if different from Executive Offices) **Brief Description of Business** Provider of wireless location products and services PROCESSED [] limited partnership, already formed [] other -[] business trust [] limited partnership, to be formed

[X] corporation

Month Year

OCT 0 2 2002

Actual or Estimated Date of Incorporation or Organization: Oct

1997 [X] Actual [] Estimated

THOMSON FINANCIAL

Jurisdiction of Incorporation or Organization:

RECEIVED

(Enter two-letter U.S. Postal Service abbreviation for State:

CN_for_Canada;_FN_for_other_foreign_jurisdiction)_

(D)(E)_

GENERAL INSTRUCTIONS

Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

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A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - · Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - · Each general and managing partner of partnership issuers.

Check Box(es) that Apply:[] Promoter [] Beneficial Owner [] Executive Officer [X] Director [] General and/or Managing Partner
Full Name (Last name first, if individual)
Timothy Neher
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o 901 Mariners Island Boulevard, Suite 300, San Mateo, California, 94404
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [X] Director [] General and/or Managing Partner
Full Name (Last name first, if individual)
W. Douglas Hajjar
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o 901 Mariners Island Boulevard, Suite 300, San Mateo, California, 94404
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [X] Executive Officer [X] Director [] General and/or Managing Partners
Full Name (Last name first, if individual)
Dr. Neil Morris
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o 901 Mariners Island Boulevard, Suite 300, San Mateo, California, 94404
Check Box(es) that Apply:[] Promoter [] Beneficial Owner [] Executive Officer [X] Director [] General and/or Managing Partner
Full Name (Last name first, if individual)
Wade R. Fenn
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o 901 Mariners Island Boulevard, Suite 300, San Mateo, California, 94404
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [X] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if individual)
Vincent Sheeran
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o 901 Mariners Island Bouleyard, Suite 300, San Mateo, California, 94404
Check Box(es) that Apply:[] Promoter [] Beneficial Owner [] Executive Officer [X] Director [] General and/or Managing Partner
Full Name (Last name first, if individual)
Daniel McKelvey Business or Residence Address (Number and Street, City, State, Zip Code)
c/o 901 Mariners Island Boulevard, Suite 300, San Mateo, California, 94404
Check Box(es) that Apply:[] Promoter[] Beneficial Owner[X] Executive Officer[] Director[] General and/or Managing Partner
Full Name (Last name first, if individual)
Robert Jacobsen
Business or Residence Address (Number and Street, City, State, Zip Code)
901 Mariners Island Boulevard, Suite 300, San Mateo, California, 94404
Check Box(es) that Apply:[] Promoter [X] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if individual)
GPS Associates, LLC
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o Laidlaw & Co. (UK) Ltd. 90 Park Avenue, New York, New York 10016

A, BASIC IDENTIFICATION DATA Cont'd

- 2. Enter the information requested for the following:
 - · Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:[] Promoter [] Beneficial Owner [X] Executive Officer []	Director [] General and/or Managing Partner
Full Name (Last name first, if individual)	-
Business or Residence Address (Number and Street, City, State, Zip Code)	
901 Mariners Island Boulevard, Suite 300, San Mateo, California, 94404	

						B. IN	FORMATIC	N ABOUT	OFFERIN	īG					
.Has	the iss	uer sold	, or doe			tend to	sell, to		redited	investo			ring?	. []	Yes [X] N
. Wha	nt is the	e minimu	m invest	ment th	at will	be acco	epted fr	com any	individ	ual?					\$ <u>100.000</u>
. Doe	s the of	fering p	ermit jo	int owne	rship o	f a sing	le unit?	·			• • • • • • •			. [X] 1	es [] No
any the the be	cer the i commiss offerin SEC and listed a dealer o	ion or s g. If a /or with re assoc	imilar r person a state	remunerat to be 1 or stat	cion for isted is tes, lis	solicits an ass	ation of the contract of the c	f purcha person (he broke	sers in or agent r or de	connect t of a b aler. I	ion with roker or f more t	sales dealer han fiv	of secur: registe: e (5) pe:	ities red wi rsons	in th to
The	Company	and Pla	cement A	gent hav	e the o	ption to	accept	funds lo	wer tha	n the Mi	nimum Ir	vestmen	t		
	Laid	law &	Compar	ny (UK), Ltc	i									
rull	. Name	(Last n	ame fi	rst, i	f indi	vidual))								
	90 P	ark Av	enue,	31 st F	loor,	New Y	ork, l	New Yo	rk 10	016					
Busi	ness o	r Resid	lence A	ddress	(Numbe	er and	Street	t, City	, Stat	e, Zip	Code)				
Vame	of As	sociate	d Brok	er or I	Dealer									•	
Stat	es in V	Thich P	erson	Listed	Has So	olicite	ed or 1	Intends	to Sc	olicit	Purcha	sers		•••	
(Cl	eck "A.	ll Stat	es" or	check	indiv:	idual S	States)						[]	All	States
	[AL]	[AK]	[A2]	[AR]	[e a]	[CO]	[CT]	[DE]	[DC]	[FL]	[&A]	[HI]	[ID]		
	[IL] [MT]	[IN]	[IA] [\\]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]		
	[RI]	[SC]	[SD]	[TN]	[XX]	[UT]	[VI]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
rul1	Name	(Last n	ame fi	rst, ii	findi	vidual)) 								
Busi	ness oi	Resid	ence A	ddress	(Numbe	er and	Street	c, City	, Stat	e, Zip	Code)				
lane	of Ass	sociate	d Brok	er or I	Dealer										
Stat	es in V	Which P	erson :	Listed	Has So	olicite	ed or I	intends	to So	licit	Purcha	sers			
Che	ck "All	State	a" or (check i	individ	iual St	ates).						[]	A11	States
•	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
	[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
	[MT] [RI]	[NE]	[NV]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[WV]	[WI]	[OR] [WY]	[PA] [PR]		
ull	. Name	(Last n	ame fi	rst, if	indiv	vidual)									
dusi	ness or	Resid	ence A	ddress	(Numbe	er and	Street	, City	, Stat	e, Zip	Code)				
iane	of Ass	ociate	d Broke	er or I	ealer	,								·	
tat	es in V	Thich P	erson 1	Listed	Has Sc	olicite	d or I	ntends	to So	licit	Purcha	ers			
Che	ck "All	. State	s" or	check i	ndivid	tual St	ates).							A 11	States
, - ·- -	[AL]	[AK]	[AZ]	[AR]	[CA]	[co]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
	[IL]	[IN]	[IA]	[K\$]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
	[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH]	[NJ]	[NM]	[NY] [VV]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
	f term 1	اعدا	ניים	[TN]	[TX]	[UT]	[VI]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

•	if answer is "none" or "zero." If the transaction is an exchange offering, check this box [] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Type of Security	Aggregate Offering Price	Amount Alread
	Debt	\$	\$
	Equity[] Common [] Preferred	\$	\$\$
	Convertible Securities	\$	\$
	Partnership Interests	\$	\$
	Other (<u>Units</u>) Total	\$ 2,500,000 \$ 2,500,000	
	Answer also in Appendix, Column 3 if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the		
	aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have		
	purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "6" if answer is		
	"none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	24^	\$1,129,000
	Non-Accredited Investors		\$
	Total (for filings under Rule 504 only		\$
	Answer also in Appendix, Column 4 if filing under ULOE.		
	^Includes 13 Foreign Accredited Investors		
3.	If this filing is for an offering under rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4.a.	Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees	[]\$_	
	Printing and Engraving Costs	[]\$	
	Legal Fees		.09,000
	Accounting Fees		
	Engineering Fees Potential Sales Commission (13%)	[]\$	
	of broker-dealers, if used	[X] \$ <u>1</u>	46,770
	Other Expenses (identify) Non-accountable (including Legal) Expenses, Blue Sky Filing Fees	[X] \$	16,750
	Total	[x] \$	272,520

	C. OFFERING PRICE, NUMBE	R OF INVESTORS, EXPENSES AND USE	OF PRO	EEDS	
•	b. Enter the difference between the aggreresponse to Part C - Question 1 and total e to Part C - Question 4.a. This difference proceeds to the issuer."	expenses furnished in response is the "adjusted gross			\$ <u>856,480</u>
5.	Indicate below the amount of the adjusted used or proposed to be used for each of amount for any purpose is not known, furni box to the left of the estimate. The total equal the adjusted gross proceeds to the is Part C - Question 4.b above.	the purposes shown. If the sh an estimate and check the l of the payments listed must			
				Payments to Officers Directors & Affiliates	Payments to Others
	Salaries and fees		[]	\$[S
	Purchase of real estate		[]	\$[} \$
	Purchase, rental or leasing and installation of machinery and	equipment	1.1	\$(] \$
	Construction or leasing of plant buildings and facilities		[]	\$ [] \$
	Acquisition of other businesses	••••••••••	[]	\$[) \$
	Repayment of indebtedness	······································	()	\$	\$
	Working Capital	***************************************	[]	\$(>	() \$ <u>856.480</u>
	Other ()		[]	s [] \$
	Column Totals		[]	\$[2	X] \$ <u>856.480</u>
	Total Payments Listed (column totals added)			[X] \$ <u>856</u> .	480_
	D. FI	EDERAL SIGNATURE			
ın under	has duly caused this notice to be signed by the undersigned daking by the issuer to furnish to the U.S. Securities and Exchandited investor pursuant to paragraph (b)(2) of Rule 502.				
Issuer	(Print or Type)	Signature Sucero Sucero	~	Date	
	Wherify Wireless, Inc.	Title of Signer (Print or Type)		September	. 6 _{, 2007}
 .		CEO			

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATURE

I. Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions of such rule? N/A

Yes No []

See Appendix, Column 5, for state response.

- The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law. N/A
- The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees. N/A
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied. N/A

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type) Wherify Wireless, Inc.	Signature Mellion	Date September 6, 2007
Name (Print or Type) VINCENT SHEERAN	Title (Print or Type)	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

	APPENDIX 4 4									
1		2	3	Disquali	5					
•	Intend to to non-ad Investors (Part B-1	ccredited s in state	Type of Security and aggregate Offering price Offered in state (Part C-Item 1)		Type of Investor and Amount purchased in State (Part C-Item 2)					
State	YES	NO	Units (\$)	No. of Accredited Investors	Amount (\$)	No. of Non- Accredited Investors	Amount	(Part E	NO	
AL										
AK				1					i	
AZ		Х	150,000	1	150,000				Х	
AR										
CA		Х	35,000	2	35,000				X	
СО										
CT		Х	50,000	1	50,000				Х	
DE										
DC										
FL									<u> </u>	
GA		Х	38,000	1	38,000				Х	
ΗI										
ID										
IL										
IN										
IA										
KS										
KY										
LA								ļ		
ME										
MD								<u> </u>	<u></u>	
MA								_		
MI			20.500		20.500					
MN		1	38,500	1	38,500			-	Х	
MS										
МО		<u></u>						<u> </u>		

AΡ		

Intend to sell to non-accredited investors in state (Part B-Item 1)			3 Type of Security And aggregate Offering price Offered in state (Part C-Item 1)		Type of Investor and Amount purchased in State (Part C-Item 2)				
State MT	YES	NO	Units (\$)	No. of Accredited Investors	Amount (\$)	No. of Non- Accredited Investors	Amount	YES	NO
NE			15.000	1	15.000				<u> </u>
NV		Х	15,000	1	15,000	_	_	-	X
NH									
NJ		X	73,500	1	73,500				Х
NM									
NY		Х	20,000	1	20,000				Х
NC									
ND									
ОН									
OK									
OR		Х	50,000	1	50,000				Х
PA						-	·		1
RI		<u> </u>				 		 	
SC	 	1							
SD									
TN								 	1
TX		Х	50,000	1	50,000				X
UT			 				-		
VT						 			
VA		Х	50,000	1	50,000			 	Х
WA						 		1	
WV	<u> </u>								
WI	<u> </u>	-						 	
WY									
PR	1	 				E	 	 	